

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2013 OF 2031
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MOVEON.ORG POLITICAL ACTION			FEC IDENTIFICATION NUMBER ▼ C C00341396		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY		
Full Name of Payee Moonlight Design			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 28 / 2014		
Mailing Address 1324 Palms Blvd.			Amount 108.00		
City Venice		State CA	Zip Code 90291		Transaction ID : SE.45619
Purpose of Expenditure Poster Design		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 28 / 2014		
Name of Federal Candidate BRIAN SCHATZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>HI</u>		
Calendar Year-To-Date Per Election for Office Sought		2041.53	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Moonlight Design			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 02 / 2014		
Mailing Address 1324 Palms Blvd.			Amount 150.00		
City Venice		State CA	Zip Code 90291		Transaction ID : SE.45664
Purpose of Expenditure Printing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2014		
Name of Federal Candidate MITCH MCCONNELL		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>KY</u>		
Calendar Year-To-Date Per Election for Office Sought		2022.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			258.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Tom Matzzie		[Electronically Filed]		Date	
Signature				MM / DD / YYYY 10 / 20 / 2014	